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AVIATION RESOURCE MANAGEMENT SURVEY WORKSHOP

AVIATION MEDICINE BREAKOUT

27 JULY 2005

ORLANDO, FLORIDA

FORSCOM

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OUTLINE

- Introduction
- Functional Area Trends
- Checklist Changes/Review
- Challenges
- Discussion
- Summary

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AVIATION MEDICINE TRENDS

FY05 OVERALL TRENDS

- If not assigned a FS, units do not implement AVN MED programs
- FDMEs are not completed within 90 days of redeployment
- Flight Surgeons are not involved in the planning process for deployment
- NGB Flight Surgeons deployed in a non-FS role

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A-COMMAND FACTORS FY05 COMMON DEFICIENCIES

- **12.00 Do individual Flight Records contain properly completed DA Form 4186 (medical clearance for flying or medical restriction from flying)? (28)**

- **2.00 Does the flight surgeon conduct aviation accident prevention surveys (AAPS) in the area of aviation medicine and keep them on file? (24)**

A-COMMAND FACTORS FY 04 vs. FY 05

- **14.00 Are extensions granted for flight physicals prior to the expiration date of the current physical? (up from 5 to 11)**

- **13.00 Do individual Flight Records contain applicable medical waiver recommendations and approval letters? (up from 4 to 15)**

A-COMMAND FACTORS FY 04 vs. FY 05

- **17.00 Has a mission analysis been conducted to determine special aeromedical training requirements? (down from 27 to 14)**

- **24.00 Does the Flight Surgeon and / or APA meet the minimum flying hour requirements? (down from 18 to 7)**

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B-CLINICAL DUTIES
FY05 COMMON DEFICIENCIES

- **7.00 Do individual Health Records contain a properly completed DA Forms 4186? (25)**
- **6.00 Does the Flight Surgeon ensure Health Records of aviation personnel are maintained properly? (21)**

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B-CLINICAL DUTIES FY 04 vs. FY 05

- **12.00 Are current extensions for flight physicals filed in individual Health Records IAW AR 40-66? (up from 2 to 8)**

- **15.00 Are sign-out procedures established to maintain accountability of Health Records? (up from 4 to 17)**

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B-CLINICAL DUTIES FY 04 vs. FY 05

- **18.00 Does the Flight Surgeon's office retain a copy of the FDME and all enclosures for a minimum of two years? (down from 4 to 3)**

C-AEROMEDICAL EVAC UNITS
FY05 COMMON DEFICIENCIES

- **7.00 Is SACMS-VT (Semi-annual Combat Medical Skills Validation Test) administered at least twice a year? (up from 2 to 3)**

- **2.00 Does the Flight Surgeon review reports of medical evacuations (run sheets) for appropriateness of the mission and care given? (up from 1 to 2)**

B-CLINICAL DUTIES FY 04 vs. FY 05

- **1.00 Does the Flight Surgeon participate in the training of air ambulance personnel? (down from 2 to 1)**

CHECKLIST CHANGES AND REVIEW

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CHECKLIST

- PURPOSE OF THE CHEKLIST IS PRIMARILY TO PROVIDE THE COMMANDER WITH A GUIDE TO DEVELOP, MANAGE, AND EVALUATE HIS PROGRAM. SECONDARY MISSION IS AS A MACOM EVALUATION TOOL

- CHANGES HAVE BEEN MADE AS A RESULT OF DEPLOYMENT TRENDS, PAST SURVEYS, AND INPUT FROM THE FIELD

- ALL QUESTIONS ARE FROM CURRENT ARMY PUBLICATIONS
  IF THE PUBLICATION IS OBSOLETE, THE ? IS THROWN OUT

- QUESTIONS HAVE BEEN SCRUTINIZED FOR RELEVANCY AND PURPOSE, AND HAVE BEEN ADDED AND DELETED AS A

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CHANGES

- More non-clinical FS questions
- SACMS-VT and training for non-flight medical personnel
- Hoist maintenance procedures
- Expanded Techniques

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REVIEW

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CHALLENGES

- INSPECTORS/OPTEMPO
- NGB FLIGHT SURGEONS
- PROCESSING NGB FLIGHT PHYSICALS (AERO)
- DEPLOYMENTS
- COMMAND EMPHASIS ON THE PROGRAM

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DISCUSSION

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SUMMARY

FREEDOM'S GUARDIAN

http://usasam.amedd.army.mil